

Participant Name: _____

Participant Birth date: _____ (month) _____ (day) _____ (year)

Participant's Address: _____

School / Organization: _____

Parent / Legal Guardian: _____

I, the undersigned parent or legal guardian, do hereby grant permission for my son/daughter to participate in the Extreme Challenge Series.

I further acknowledge, understand and agree that by participating in Extreme Challenge Series there is the possibility of physical illness and/or injury (minimal, serious, and catastrophic) and that my son/daughter is assuming the risk of such injury by participating in this Event.

I authorize any representative of the Extreme Challenge Series and/or Cheer Central USA, Inc to consent and authorize any medical attention, treatment, surgery or administration of drugs by qualified and licensed medical personnel for my son/daughter which may become necessary.

I understand I will be notified as soon as possible in the event of an emergency. All expenses of such treatment will be assumed by me or my insurance company.

I agree to protect, defend, indemnify and hold harmless Extreme Challenge Series and Cheer Central USA, Inc., including its owners, directors, officers, employees and sponsors from and against any and all claims, demand, losses, suits liabilities, costs, or other damages including court costs and attorneys fees, arising from any injury to, or death of son/daughter, the undersigned, or any other persons or damage to or destruction of property arising out of or in connection with my son/daughter's participation.

I understand the Extreme Challenge Series and Cheer Central USA, Inc. produces promotional material about their events. I understand that my son/daughter may be included in video tape or photography taken during this event. I hereby grant the Extreme Challenge Series, its successors, assignees, sponsors, any televisions networks and all other commercial exhibitors the exclusive right to photography and/or video tape my son/daughter and further to utilize my son/daughter's name, face, likeness, voice and appearance as part of the event, and in advertising and promotion of the event, without reservation or limitation. In granting this license, I understand the Extreme Challenge Series is under no obligation to exercise any of its rights, licenses and privileges herein granted.

Rules/Regulations

- No smoking, consumption of alcoholic beverages or use of illegal drugs allowed.
- Extreme Challenge Series reserves the right to disqualify/eject any participant for unruly behavior or for conduct unbecoming to the event.
- Participants must respect all venue rules and regulations.
- Participants must obey all rules and regulations set forth by the event.

I have completely read and understand the above release and rules/regulations

Signature of Participant: _____

Signature of Parent / Guardian: _____

Home Number: _____ Business Number: _____

E-Mail Address: _____

Medical Insurance Company & Policy Number: _____

Emergency Contact: _____ Phone number: _____

***Bring Medical Release forms for each cheerleader the day of the Event.
DO NOT Mail forms with the registration.***